## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

470054

(Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE	) 	RATE	FEE	
BASIC FEE				<b>G</b>						345.00	OR		690.00	
TOTAL CLAIMS			13	minus 2	20=	*			X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	E	minus	3 =	: 3		l	X39=		OR	X78=	23400	
MULTIPLE DEPENDENT CLAIM PRESENT								+130=		OR	+260=	~		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	924°°		
CLAIMS AS AMENDED - PART II									İ	NITITY		OTHER	THAN	
			umn 1) AIMS			Column 2) HIGHEST	(Column 3)	_	SMALL		OR	SMALL		
<b>AMENDMENT A</b>		REM Al	IAINING FTER NDMENT	eger S	PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	22	Minus	**	20	= 2		X\$ 9=	18	OR	X\$18=	,	
	Independent FIRST PRESE	* NTATIO	ON OF MI	Minus	PEND		=		X39=		OR	X78=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+130=	1.0	OR	+260=		
								Δ.	TOTAL	111	OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)								AL	ODIT. FEE	1		AUDII. FEEI		
8		CL	AIMS	1		HIGHEST				ADDI-			ADDI-	
AMENDMENT B		A	IAINING FTER NDMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
IQN	Total	*	- <u>-</u>	Minus	**		=		X\$ 9=		OR	X\$18≃		
AME	Independent	*		Minus	***		=		X39=		OR	X78=		
	FIRST PRESE	NIAII	JN OF MU	JUIPLE DEF	'ENE	DENI CLAIM			155	<del>:-</del>				
								L	+130=		OR	+260=		
								ΑC	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE		
			umn 1)		(C	Column 2)	(Column 3)							
AMENDMENT C		REM Al	AIMS IAINING FTER NDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	···	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*		Minus	***		=		X39=			X78=		
_	FIRST PRESE	NTATIO	ON OF MU	JLTIPLE DEF	PENE	ENT CLAIM	·	$\vdash$			OR			
+ * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									+130=		OR	+260=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 470054

## Total Fee Calculation

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	Fee Cade	Total # Claims		Sumber Exten	Х	Fae	Fcc	4	Total
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Casic Filing Fee	201/101 :	(7						•	<u>690°°</u>
Total Claim: >20	203/101	13	-20 =		У,				
Independent Claim: >1	303/103 :	_6	. <b>.</b>	<u>3</u>	x				23400
Mult, Dep Claim Present	204/104								
Surchurge	205/105							•	13000
English Translation	110							_	
TOTAL FEE CALCULA	KTION							_	
Fees due upon filing th	te application:								
Total Filing Fees Due	= s <u>10</u>	54 oo				•	-		
Less Filing Fees Submi	ined -5								
BALANCE DUE	= \$ 100	A 00	•						٠
James Washin	ugten								

Figure 7

FORM DIPE-RAM-DI (Rev. 12/97)

Office of Initial Patent Expinination